

U.S. Department of Justice  
United States Marshals Service

# PROCESS RECEIPT AND RETURN

See "Instructions for Service of Process by U.S. Marshal"

PLAINTIFF XCOAL ENERGY RESOURCES	COURT CASE NUMBER 2:23mc00018
DEFENDANT BLUESTONE ENERGY SALES CORPORATION, et. al.	TYPE OF PROCESS Writ of Execution

**SERVE  
AT**

NAME OF INDIVIDUAL, COMPANY, CORPORATION, ETC. TO SERVE OR DESCRIPTION OF PROPERTY TO SEIZE OR CONDEMN  
Bluestone Energy Sales Corporation, C/O President, James C. Justice, III

ADDRESS (Street or RFD, Apartment No., City, State and ZIP Code)  
262 Deer Wood Circle, White Sulphur Springs, WV 24986

SEND NOTICE OF SERVICE COPY TO REQUESTER AT NAME AND ADDRESS BELOW James C. Walls, III 501 Grant Street, Suite 200 Pittsburgh, PA 15219	Number of process to be served with this Form 285 1
	Number of parties to be served in this case 1
	Check for service on U.S.A.

SPECIAL INSTRUCTIONS OR OTHER INFORMATION THAT WILL ASSIST IN EXPEDITING SERVICE (Include Business and Alternate Addresses, All Telephone Numbers, and Estimated Times Available for Service):

Signature of Attorney other Originator requesting service on behalf of:

James C. Walls, III Digitally signed by James C. Walls, III  
Date: 2023.05.05 11:11:47 -04'00'

☒ PLAINTIFF  
☐ DEFENDANT

TELEPHONE NUMBER

412-562-1506

DATE

5/19/2023

## SPACE BELOW FOR USE OF U.S. MARSHAL ONLY - DO NOT WRITE BELOW THIS LINE

I acknowledge receipt for the total number of process indicated. (Sign only for USM 285 if more than one USM 285 is submitted)	Total Process _____	District of Origin No. _____	District to Serve No. _____	Signature of Authorized USMS Deputy or Clerk	Date
I hereby certify and return that I <input type="checkbox"/> have personally served, <input type="checkbox"/> have legal evidence of service, <input type="checkbox"/> have executed as shown in "Remarks", the process described on the individual, company, corporation, etc., at the address shown above on the on the individual, company, corporation, etc. shown at the address inserted below.					
<input type="checkbox"/> I hereby certify and return that I am unable to locate the individual, company, corporation, etc. named above (See remarks below)					
Name and title of individual served (if not shown above)				Date	Time <input type="checkbox"/> am <input type="checkbox"/> pm
Address (complete only different than shown above)				Signature of U.S. Marshal or Deputy	

Costs shown on attached USMS Cost Sheet >>

REMARKS